ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal Conversely, failure to file the appropriate federal notice will not result in a loss of state exemption state exemption unless such exemption is predicated on the filing state.





UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

OMB APPROVAL
OMB Number: 3235-0076
Expires: April 30, 2008
Estimated average burden hours per response.... 1

SEC USE ONLY
Prefix Scrial
DATE RECEIVED

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

SHARON CAPITAL, LP

Name of Offering (check if this is an amendment and name has changed, and indicate change.)

Filing Under (Check box(es) that

Rule 504

Rule 505

[X] Rule 506

[] Section 4(6)

[]ULOE

Type of Filing: [X] New Filing [] Amendment

PROCESSED

MAY 0 3 2007

THOMSON FINANCIAL



Name of Issuer: SHARON CAPITAL, LP			
Made and a service of the service of	ER ROAD N. CT 06069	Telephone Number	(860) 364-467 <u>9</u>
Address of Principal Business Operations Brief Description of Business: PRIVATE I	Same as Above NVESTMENT PARTNERSHIP	Telephone Number	Same as Above
Type of Business Organization [] corporation [] business trust	[X] limited partnership, already formed [] limited partnership, to be formed	[] other (ple	ase specify):
Actual or Estimated Date of Incorporation or Orga	Month ration or Organization: [08] nization: (Enter two-letter U.S. Postal Service CN for Canada; FN for other foreign j	Year [05] [X] Actual abbreviation for State: jurisdiction) [CT]	[] Estimated

GENERAL INSTRUCTIONS

1. Enter the information requested about the issued

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix in the notice constitutes a part of this notice and must be completed.

 Each promoter of the issuer, if the issuer has been organized within the past five years;
 Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
Each general and managing partner of partnership issuers.
Check Box(es) that Apply: [] Promoter [] Beneficial Owner [] Executive Officer [] Director [X] General and/or Managing Partner
Full Name (Last name first, if individual): FIRST SHARON LLC
Business or Residence Address (Number and Street, City, State, Zip Code): 1 HOSIER ROAD SHARON, CT 06069
Check Box(es) that Apply: [] Promoter [] Beneficial [X] Executive Officer [] Director [X] General and/or Owner Managing Partner
Full Name (Last name first, if individual): MUTI III, ARTHUR M.
Business or Residence Address (Number and Street, City, State, Zip Code): 1 HOSIER ROAD SHARON, CT 06069
Check Box(es) that Apply: [] Promoter [] Beneficial Owner [] Executive Officer [] Director [] General and/or Managing Partner
Full Name (Last name first, if individual):
Business or Residence Address (Number and Street, City, State, Zip Code):
Check Box(es) that Apply: [] Promoter [] Beneficial Owner [] Executive Officer [] Director [] General and/or Managing Partner
Full Name (Last name first, if individual):
Business or Residence Address (Number and Street, City, State, Zip Code):
Check Box(es) that Apply: [] Promoter [] Beneficial Owner [] Executive Officer [] Director [] General and/or Managing Partner
Full Name (Last name first, if individual):
Business or Residence Address (Number and Street, City, State, Zip Code):
(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

2. Enter the information requested for the following:

2	2. What is	the minit	num inve	stment tha	t will be a	eccepted fr	om any in	dividual?	ling under			s	100,000
٠			•							nt amount	•	5	es No
						single unit					. 45		X] []
]	commission of a person	on or simi n to be list list the na	ilar remun ted is an a me of the	eration fo ssociated broker or	r solicitati person or dealer. If	on of pure agent of a	hasers in o broker or five (5) po	connection dealer reg crsons to b	i with sales istered with e listed are	directly or a sof securitient of securitient the SEC and a securitient of the security of the	and/or with	n a state	
Full Na	ime (Last	name firs	t, if indivi	dual)				_					
Busine	ss or Resi	dence Ad	dress (Nu	mber and	Street, Cit	y, State, Z	ip Code)						
Name o	of Associa	ated Broke	er or Deal	er									
	(Check '[AL] [IL] [MT] [RI]	'Al! State: [AK] [IN] [NE] [SC]	s" or chec [AZ] [IA] [NV] [SD]	k individu [AR] [KS] [NH] [TN]	r Intends tal States) [CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	Purchasers [CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[] [GA] [MN] [OK] [WI]	All States [HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]
Full Na	ame (Last	name firs	st, if indiv	idual)									
Busine	ss or Res	idence Ad	dress (Nu	mber and	Street, Ci	ty, State, 2	Zip Code)						
Name	of Associ	ated Brok	er or Deal	er									
States	in Which (Check [AL] [IL] [MT] [RI]	Person Li "All State [AK] [IN] [NE] [SC]	isted Has Ses" or chec [AZ] [IA] [NV] [SD]	Solicited of the control of the cont	or Intends ual States) [CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	Purchasers [CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [M]] [OH] [WV]	[] [GA] [MN] [OK] [WI]	All States [HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]
Full N	ame (Las	t name fir	st, if indiv	idual)				*					
Busine	ess or Res	idence Ac	idress (Nu	imber and	Street, C	ity, State, 2	Zip Code)						
Name	of Associ	iated Brok	ter or Dea	ler			-						
States	in Which (Check [AL] [IL]	Person L "All State [AK] [IN]	isted Has es" or chec [AZ] [IA]	ck individ [AR] [KS]	ual States [CA] [KY]	to Solicit)[CO] [LA]	 [CT] [ME]	[DE] [MD]	[DC] [MA]	[FL] [MI]	[GA] [MN]	All States [HI] [MS]	[ID] [MO]
	[MT] [RI]	[NE] [SC]	[NV] [SD]	[NH] [TN]	[NJ] [TX]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK]	[OR] [WY]	[PA] [PR]
			Л	Jse blank	sheet, or	copy and	use addit	ional copi	es of this :	sheet, as no	ecessary.)		

1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?.......

[] [X]

exchange and already exchanged.		
-	Aggregate	Amount Already
Tong of Converts	Offering Price	Sold
Type of Security	\$ 0	\$ 0
Ded	\$0	\$0
Equity	φV	சு ∪
[] Common [] Preferred	\$ 0	\$ 0
Convenible Securities (including warrants)	*	* ·
ratucionip interests	\$ 10,000,000	\$ 732,922
Other (Specify).	\$0	\$ 0
Total	\$ 10,000,000	\$ 732,922
Answer also in Appendix, Column 3, if filing under ULOE.		
2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under <u>Rule 504</u> , indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investor	Aggregate Dollar Amount of Purchases
A 19. 1 f	1	\$ 732,922
Accredited Investors	•	\$
Non-accredited Investors		Š
Total (for filings under Rule 504 only)		•
Answer also in Appendix, Column 4, if filing under ULOE.		
3. If this filing is for an offering under <u>Rule 504</u> or <u>505</u> , enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.		
	Type of Security	Dollar Amount
Type of offering	131/0 01 000000	Sold
Rule 505		\$ 0
Regulation A		\$ 0
Rule 504		\$0
Total		\$0
4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees Printing and Engraving Costs Legal Fees Accounting Fees Engineering Fees Sales Commissions (specify finders' fees separately) Other Expenses (identify) Total b. Enter the difference between the aggregate offering price given in response to Part C – Question expenses furnished in response to Part C – Question 4.a. This difference is the "adjusted gross process."	i 1 and total	[X] \$ 1,300 [X] \$ 1,700- [X] \$ 7,000 [X] \$15,000 [] \$ 0 [] \$ 0 [] \$ 0 [X] \$25,000
issuer."		

1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box " and indicate in the columns below the amounts of the securities offered for

estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set form in response to 1 are C - Question 4.b above. Payments to Officers, Directors, & Payments To Others Affiliates []\$0 []\$ 0 Salaries and fees 0 []\$0 []\$ Purchase of real estate Purchase, rental or leasing and installation of machinery []\$0 0 []\$ and equipment 0 []\$0 []\$ Construction or leasing of plant buildings and facilities...... Acquisition of other businesses (including the value of securities involved in this offering that may be used in 0 []\$0 []\$ exchange for the assets or securities of another issuer pursuant to a merger) []\$0 Repayment of indebtedness []\$ []\$0 [X] \$ 9,975,000 Working capital []\$0 []\$ Other (specify):

D. FEDERAL SIGNATURE

[]\$0

[]\$0

[X] \$ 9,975,000

[]\$

[X] \$ 9,975,000

The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under <u>Rule 505</u>, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of <u>Rule 502</u>.

Column Totals

Total Payments Listed (column totals added)

Issuer (Print or Type) SHARON CAPITAL, LP	Signature AMA!	Date 4/2/2007
Name of Signer (Print or Type) ARTHUR M. MUTI III	Title of Signer (Print or Type) MANAGING MEMBER OF GENERAL PART	TNER

ATTENTION
Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

1. Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such fine:	1 03 110
1. Is any party described in 17 of it 250.200 proteinly obsyction may	[] [X]
	ו און ו

See Appendix, Column 5, for state response.

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239,500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type) SHARON CAPITAL, LP	Signature Ahh	Date / 1/2007
Name of Signer (Print or Type) ARTHUR M. MUTI III	Title (Print or Type) MANAGING MEMBER OF GENERAL PARTNER	

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

1	2	2	3		4				5 Disqualification	
			Type of security					under Sta	ite ULOE	
	Intend	to sell	and aggregate					(if yes, attach		
		ccredited	offering price		Type of	investor and		explana	explanation of waiver granted)	
		s in State	offered in state (Part C-Item 1)		amount pur	chased in State C-Item 2)		(Part E	-Item 1)	
	(Part B	-Item 1)	(Part C-Item 1)	Number of	(1 at	Number of				
)				Accredited		Non-Accredited	i			
State	Yes	No		Investors	Amount	Investors	Amount	Yes	No	
AL										
AK										
AZ										
AR										
CA										
СО										
СТ		х	Partnership Interest - \$10,000,000	1	\$732,922	0	\$0		х	
DE										
DC										
FL										
GA										
НІ								<u></u>		
ΙD										
IL										
IN										
lA		<u> </u>							 	
KS	<u> </u>								 	
KY									╬—	
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MA									 	
MI	<u> </u>			<u> </u>					1	
MN		<u> </u>	1							
MS	<u></u>	<u> </u>		<u> </u>				<u> </u>	<u></u>	

	to non-a	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)			(if yes, explana waiver g	under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
				Number of Accredited		Number of Non-Accredited	A	Vaa	No	
State	Yes	No		Investors	Amount	Investors	Amount	Yes	No	
MT										
NE										
NV										
NH										
ΙΝ										
NM										
NY										
NC										
ND										
ОН										
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OR										
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